FORM NLRB-501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
19-CA-317962	5/12/2023		

INSTRUCTIONS:

	which the alleged untair labor practice occurred or is occur	ring.	
	OYER AGAINST WHOM CHARGE IS BROUGHT		
a. Name of Employer		b. Tel. No.	
CASA of Oregon		(b) (6), (b) (7)(C)	
		c. Cell No.	
		f. Fax. No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a o mail	
20508 SW Roy Rogers Rd Suite 155	(b) (6), (b) (7)(C)	g. e-mail	
		^{(b) (6), (b) (7)(} @casaoforegon.org	
OR Sherwood 97140		h. Number of workers employed	
		26	
i. Type of Establishment (factory, mine, wholesaler, etc.)			
Others	Affordable Housing Nonprofit		
The above-named employer has engaged in and is engaged	ging in unfair labor practices within the meaning of sectio	n8(a), subsections (1) and	
(list subsections) 5	of the National Labor	Relations Act, and these unfair labor	
practices are practices affecting commerce within the me	aning of the Act, or these unfair labor practices are pract	tices affecting commerce within the	
meaning of the Act and the Postal Reorganization Act.			
Basis of the Charge (set forth a clear and concise state)	amont of the facts constituting the alleged unfairleborns	nationa)	
2. Dasis of the Charge (set forth a clear and concise state	ement of the facts constituting the alleged unital labor pr	actices)	
See additional page			
page			
(b) (6), (b) (7)(C) y filing charge (if labor organization, g	ive full name, including local name and number)		
(b) (b), (b) (7)(C) CWA 7901/CASA of Oregon Union			
4a. Address (Street and number, city, state, and ZIP code		4b. Tel. No.	
4a. Addless (Street and Hamber, Sity, State, and Eli-	5)		
		(b) (6), (b) (7)(C)	
1017 SW Gaines Street		4c. Cell No.	
OR Portland 97239			
		4d. Fax No.	
		4e. e-mail	
		(b) (6), (b) (7)(C)	
F. F. III. a constant and the second section of the s	- f bi-bi-ki		
5. Full name of national or international labor organizatio	not which it is an attiliate of constituent unit (to be filled in	when charge is filed by a labor organization)	
Communications Workers of America, AFL-CIO			
e DEOL	ARATION	Tal Na	
	ove charge and that the statements	Tel. No.	
	ny knowledge and belief.	(541) 968-7372	
(4) (4), (4) (1), (5)	·	Office, if any, Cell No.	
	(b) (6), (b) (7)(C)		
(nignoture of representative experience)	(Drint/hung name and title and file	Fax No.	
(signature of representative or person making charge)	(Print/type name and title or office, if any)		
1017 SW Gaines Street		o mail	
Address Portland OR 97239	Date 05/11/2023 09:27:46 PM	e-mail (b) (6), (b) (7)(C)	
		(6) (6), (6) (7)(6)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

Basis of the Charge

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees.

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining representative of its employees by making unilateral changes in terms and conditions of employment.

List Changes	Approximate date of change
Additional duties to (b) (6), (b) (7)(C)	® ^{(©), ©), (7} /2023
Additional duties to (b) (6), (b) (7)(C)	®)©,©) ⁽⁷ /2023
Additional duties to (b) (6), (b) (7)(C)	^{[0](6], [0]77} /2023

8(a)(5)

Within the previous six months, the Employer failed and refused to bargain in good faith with the union as the collective bargaining

representative of its employees by failing to furnish information requested by the union.

Date of request	Employer representative	List items requested	Date refused
05/07/2023	(b) (6), (b) (7)(C)	Financial Statements	05/11/2023
05/07/2023	(b) (6), (b) (7)(C)	Other documents that informed reduction decision	05/11/2023
05/07/2023	(b) (6), (b) (7)(C)	Cost saving measures taken to avoid layoff	05/11/2023



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

Agency Website: www.nlrb.gov Telephone: (503)326-3085 Fax: (503)326-5387



Download NLRB Mobile App

May 12, 2023

(b) (6), (b) (7)(C) CASA of Oregon

20508 SW Roy Rogers Road, Suite 155 Sherwood, OR 97140

SUBREGION 36

Green-Wyatt Federal Building

Portland, OR 97204-2170

1220 SW 3rd Avenue, Suite 605

Re: CASA of Oregon Case 19-CA-317962

Dear (b) (6), (b) (7)(C)

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Attorney Sarah Ingebritsen whose telephone number is (503)326-3088.

Right to Representation: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Due to the nature of the allegations in the enclosed unfair labor practice charge, we have identified this case as one in which injunctive relief pursuant to Section 10(j) of the Act may be appropriate. Therefore, in addition to investigating the merits of the unfair labor practice allegations, the Board agent will also inquire into those factors relevant to making a determination as to whether or not 10(j) injunctive relief is appropriate in this case. Accordingly, please include your position on the appropriateness of Section 10(j) relief when you submit your evidence relevant to the investigation.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence:</u> All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal

letters, electronically to the email address you provide. To ensure that you receive important caserelated correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

<u>Controlled Unclassified Information (CUI)</u>: This National Labor Relations Board (NLRB) proceeding may contain Controlled Unclassified Information (CUI). Subsequent information in this proceeding may also constitute CUI. National Archives and Records Administration (NARA) regulations at 32 CFR Part 2002 apply to all executive branch agencies that designate or handle information that meets the standards for CUI.

* * *

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

RONALD K. HOOKS Regional Director

By:

JESSICA DIETZ Officer in Charge

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire
- 3. Notice of Federal Mediation and Conciliation Services for Bad Faith Bargaining Allegations

cc: Federal Mediation and Conciliation Services

FORM NLRB-5081 (3-11)	NATIONAL LABOR RELA	TIONS BOARD				
QUESTIONNAIRE ON COMMERCE INFORMATION						
Please read carefully, answer all applicable items, and return to the NLRB Office. If additional space is required, please add a page and identify item number.						
CASE NAME			ASE NUMBER 9-CA-317962			
1. EXACT LEGAL TITLE OF ENTITY (As filed w	ith State and/or stated in legal	documents forming entity)				
2. TYPE OF ENTITY						
[] CORPORATION [] LLC [] LLP [PARTNERSHIP [] SOLI	E PROPRIETORSHIP [] OTHER	(Specify)			
3. IF A CORPORATION or LLC						
A. STATE OF INCORPORATION OR FORMATION	B. NAME, ADDRESS, AND	RELATIONSHIP (e.g. parent, subsidia	ry) OF ALL RELATED EN	NTITIES		
4. IF AN LLC OR ANY TYPE OF PARTNERSHI	P, FULL NAME AND ADDRE	SS OF ALL MEMBERS OR PARTN	VERS			
5. IF A SOLE PROPRIETORSHIP, FULL NAME	AND ADDRESS OF PROPRI	ETOR				
,						
6. BRIEFLY DESCRIBE THE NATURE OF YOU	R OPERATIONS (Products ha	andled or manufactured, or nature of sei	rvices performed).			
7A. PRINCIPAL LOCATION:	7B. BRANC	H LOCATIONS:				
0 NUMBER OF BEODIE BRECENELVENDE	VED					
8. NUMBER OF PEOPLE PRESENTLY EMPLO	I					
A. TOTAL:	B. AT THE ADDRESS INVO					
9. DURING THE MOST RECENT (Check the app.	ropriate box): [] CALENDAR	[] 12 MONTHS or [] FISCAL	YEAR (FY DATES	NO)		
Did you provide services valued in excess of \$50,0			YES	NO NO		
A. Did you provide services valued in excess of \$50,0	000 directly to customers outside	your State? If no, indicate actual value	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	300 directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate	your State? If no, indicate actual value customers in your State who purchased the value of any such services you	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	000 directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems,	YES	NO NO		
A. Did you provide services valued in excess of \$50,0 \$	000 directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems,	YES	NO NO		
A. Did you provide services valued in excess of \$50,0 \$	ooo directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, ed	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems, ducational institutions, or retail concerns	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	300 directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, ex- ectly to customers located outside d in excess of \$50,000 directly to	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems, lucational institutions, or retail concerns e your State? If less than \$50,000, indicate of customers located inside your State who	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	ooo directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, ed ectly to customers located outside d in excess of \$50,000 directly to from directly outside your State?	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems, lucational institutions, or retail concerns e your State? If less than \$50,000, indicate amount? If less than \$50,000, indicate amount	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	ooo directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, exceptly to customers located outside d in excess of \$50,000 directly to from directly outside your State.	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000,	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly ou provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting s If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly amount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in excess.	ooo directly to customers outside so valued in excess of \$50,000 to train the services valued in excess of \$50 tations, commercial buildings, exceptly to customers located outside d in excess of \$50,000 directly to from directly outside your State excess of \$50,000 from directly outside sess of \$50,000 from directly outside sess of \$50,000 from enterprises	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000,	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly ou provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting s If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly amount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in excess didicate amount. \$ G. Did you purchase and receive goods valued in excess of \$50,000 to \$1.00 to	ooo directly to customers outside s valued in excess of \$50,000 to tside your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, ed ectly to customers located outside d in excess of \$50,000 directly to from directly outside your State eess of \$50,000 from directly out eess of \$50,000 from enterprises indicate amount. \$	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate or customers located inside your State where the state is the property of the state of the state of the state is the state of the state is the state of the state is the state of the state of the state is the state of the sta	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly ou provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting s If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly out amount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods valued in excending amount. \$ G. Did you purchase and receive goods you purchase amount. \$ G. Did you purchase and receive goods you purchase amount. \$ G. Did you purchase amount. \$ G. Did yo	solution of \$50,000 to train of \$50,000 from directly out the sets of \$50,000 from directly out train of \$50,000 from enterprises the train of \$50,000 fro	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate or customers located inside your State where the state is the property of the state of the state of the state is the state of the state is the state of the state is the state of the state of the state is the state of the sta	YES	NO		
A. Did you provide services valued in excess of \$50,0 \$	ooo directly to customers outside so valued in excess of \$50,000 to taide your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, except to customers located outside d in excess of \$50,000 directly to from directly outside your State? tess of \$50,000 from directly outside sess of \$50,000 from enterprises adicate amount. \$ services (Check the largest amounts of \$1,000,000 or more if less on this? If yes, specify date:	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems, ducational institutions, or retail concerns e your State? If less than \$50,000, indicate or customers located inside your State wh? If less than \$50,000, indicate amount saide your State? If less than \$50,000, who received the goods directly from count) than \$100,000, indicate amount.	YES			
A. Did you provide services valued in excess of \$50,0 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly ou provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting s If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly amount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in excess indicate amount. \$ G. Did you purchase and receive goods valued in excepoints outside your State? If less than \$50,000, in H. Gross Revenues from all sales or performance of [] \$100,000 [] \$250,000 [] \$500,000 []	ooo directly to customers outside so valued in excess of \$50,000 to taide your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, exceptly to customers located outside d in excess of \$50,000 directly to from directly outside your State? The excess of \$50,000 from directly outside your State? The exest of \$50,000 from enterprises adicate amount. Services (Check the largest amount. Service	your State? If no, indicate actual value customers in your State who purchased the value of any such services you ,000 to public utilities, transit systems, ducational institutions, or retail concerns e your State? If less than \$50,000, indicate or customers located inside your State wh? If less than \$50,000, indicate amount saide your State? If less than \$50,000, who received the goods directly from count) than \$100,000, indicate amount.	YES			
A. Did you provide services valued in excess of \$50,0 \$	soluted in excess of \$50,000 to traide your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, executed to customers located outside d in excess of \$50,000 directly to from directly outside your State? Less of \$50,000 from directly outside services (Check the largest and services (Check the largest and \$1,000,000 or more If less that? If yes, specify date: NOR OTHER EMPLOYER Grassociation or group).	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, who received the goods directly from than \$100,000, indicate amount.	YES			
A. Did you provide services valued in excess of \$50,0 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly ou provided. \$ C. If you answered no to 9A and 9B, did you provide newspapers, health care institutions, broadcasting s If less than \$50,000, indicate amount. \$ D. Did you sell goods valued in excess of \$50,000 directly amount. \$ E. If you answered no to 9D, did you sell goods value purchased other goods valued in excess of \$50,000 \$ F. Did you purchase and receive goods valued in excess of \$50,000 \$ G. Did you purchase and receive goods valued in excepoints outside your State? If less than \$50,000, in H. Gross Revenues from all sales or performance of [] \$100,000 [] \$250,000 [] \$500,000 [] \$100,000 [] \$	soluted in excess of \$50,000 to traide your State? If no, indicate services valued in excess of \$50 tations, commercial buildings, executed to customers located outside d in excess of \$50,000 directly to from directly outside your State? Less of \$50,000 from directly outside services (Check the largest and services (Check the largest and \$1,000,000 or more If less that? If yes, specify date: NOR OTHER EMPLOYER Grassociation or group).	your State? If no, indicate actual value customers in your State who purchased the value of any such services you 1,000 to public utilities, transit systems, ducational institutions, or retail concerns the your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, indicate amount is side your State? If less than \$50,000, who received the goods directly from than \$100,000, indicate amount.	YES			

PRIVACY ACT STATEMENT

E-MAIL ADDRESS

DATE

12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE

SIGNATURE

NAME AND TITLE (Type or Print)

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

NOTICE OF FEDERAL MEDIATION AND CONCILIATION SERVICES FOR BAD FAITH BARGAINING ALLEGATIONS

Under the National Labor Relations Act, both the employer and union have a number of obligations under the law, including the duty to bargain in good faith.

We encourage you to take advantage of the following resources from the Federal Mediation and Conciliation Service (FMCS) (www.fmcs.gov). FMCS is a non-regulatory, independent federal agency, separate from the National Labor Relations Board (NLRB), whose mission is to preserve and promote labor-management peace and cooperation. FMCS services include:

- Mediation, if you need assistance and support with your contract negotiations (available at https://www.fmcs.gov/services/resolving-labor-management-disputes/collectivebargaining-mediation/);
- Skills development training for collective-bargaining negotiation, committee effectiveness, and conflict resolution (available at https://www.fmcs.gov/services/education-andoutreach/skills-development-training/);
- Education on contract administration (available at https://www.fmcs.gov/services/buildinglabor-management-relationships/).

Education on contract administration (available at FMCS is a Congressionally funded agency offering support to both unions and employers at workplaces and these FMCS services and resources are provided <u>at no cost</u>. FMCS services are customized to the specific needs of employer and union leadership groups and FMCS is available to assist with next steps and/or answer questions that come up throughout a collective-bargaining agreement negotiation process, as well as for future stages of a labor-management relationship.).

For more information on the full range of FMCS services and how these services can be helpful throughout various stages of the collective bargaining process, see OM 22-08. To discuss the specific needs of your group, please reach out to an FMCS mediator (https://www.fmcs.gov/aboutus/locations/find-a-mediator/) or by phone at (202) 606-8100.